

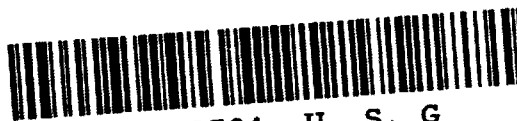
COLORADO
DEPARTMENT
OF HEALTH

ROY ROMER
Governor

PATRICIA A. NOLAN, MD
Executive Director

4210 East 11th Avenue
Denver, Colorado 80220-371
Phone (303) 320-8333

Telefax . . . bers:
Main Building . . .



983789504 U. S. G

U. S. GOVERNMENT, EPA CLEANUP - DENVER
4950 ASBURY AVE 7 DENVER
1-7

US EPA Clean-Up (Fit)
1776 S. Jackson St. #200
Denver, CO 80210

MAR 25 1992

RE: Notification of Hazardous Waste Activity
EPA ID Number: *COR983789504*

Dear: John DuWaldt

This letter is to inform you of receipt by the Hazardous Materials & Waste Management Division, Colorado Department of Health, a Notification of Hazardous Waste Activity (EPA Form 8700-12) has been submitted by your company for the following:

SMALL QUANTITY GENERATOR

In accordance with state regulations, the EPA ID Number listed above has been assigned to the following location: (Future correspondence should include this number.)

4950 Asbury Ave. Unit 7
Denver, CO 80222

Any change in location would require a new Notification of Hazardous Waste Activity (EPA Form 8700-12) be filed, as EPA ID Numbers are location specific. Failure to have an EPA ID Number for a new location or use of the wrong EPA ID Number in shipping hazardous wastes may result in Enforcement Action under the Colorado Hazardous Waste Act (Sections 25-15-308 through 310, C.R.S.). If any of the following change, notify this office in writing at the above address: 1) mailing address; 2) name of facility; 3) generator status; 4) contact name, ownership or phone number; 5) type of waste generated; 6) site is closed.

Please be aware that the handling and management of hazardous waste, including the generation, transportation, treatment, storage, and disposal of hazardous waste, is regulated under the Colorado Hazardous Waste Regulations (6 CCR 1007-3) Part 260 through 268; Part 2, 99 and 100.

If you have any questions, or need further information, please contact me at (303) 331-4840.

Sincerely,

J. M. Polniak
Jeannette M. Polniak

Hazardous Materials & Waste Management Division

8HWA1-PJ

Please print or type with ELITE type (12 characters per inch) in the unshaded areas only.

Please refer to the instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).



Notification of Regulated Waste Activity

United States Environmental Protection Agency

Date Received
(For Official Use Only)

SDV FEB 3 1992

I. Installation's EPA ID Number (Mark 'X' in the appropriate box)

☒ A. First Notification ☐ B. Subsequent Notification (complete item C)

C. Installation's EPA ID Number

C05983789504

II. Name of Installation (Include company and specific site name)

U S E P A (F I T) C L E A N U P

III. Location of Installation (Physical address not P.O. Box or Route Number)

Street

4 9 5 0 A S B U R Y A V E U N I T # 7

Street (continued)

City or Town

D E N V E R

State

ZIP Code

C O

8 0 2 2 2 -

County Code

County Name

D E N V E R

IV. Installation Mailing Address (See instructions)

Street or P.O. Box

7 7 6 S. J A C K S O N S T # 2 0 0

City or Town

D E N V E R

State

ZIP Code

C O

8 0 2 1 0 -

V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (last)

D U W A L D T

(first)

J O H N

Job Title

F I T M

Phone Number (area code and number)

3 0 3 - 7 5 7 - 4 9 8 4

VI. Installation Contact Address (See instructions)

A. Contact Address Location

B. Street or P.O. Box

☐ ☒ X

1 7 7 6 S. J A C K S O N S T # 2 0 0

City or Town

D E N V E R

State

ZIP Code

C O

8 0 2 1 0 -

VII. Ownership (See instructions)

A. Name of Installation's Legal Owner

U S E P A

Street, P.O. Box, or Route Number

9 9 1 8 T H S T R E E T

City or Town

D E N V E R

State

ZIP Code

C O

8 0 2 0 2 -

Phone Number (area code and number)

3 0 3 - 2 9 4 - 7 1 2 3

B. Land Type

C. Owner Type

D. Change of Owner Indicator

(Date Changed) Month Day Year

P

F

Yes

No

Month

Day

Year

ID - For Official Use Only

VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions.)

A. Hazardous Waste Activity

B. Used Oil Fuel Activities

1. Generator (See instructions) ☐ 3. Treater, Storer, Disposer (at installation)
a. Greater than 1000kg/mo (2,200 lbs.) Note: A permit is required for this activity; see instructions.
☒ b. 100 to 1000 kg/mo (220 - 2,200 lbs.)
☐ c. Less than 100 kg/mo (220 lbs.)
4. Hazardous Waste Fuel
a. Generator Marketing to Burner
b. Other Marketers
c. Burner - indicate device(s) -
Type of Combustion Device
☐ 1. Utility Boiler
☐ 2. Industrial Boiler
☐ 3. Industrial Furnace
5. Underground Injection Control
2. Transporter (Indicate Mode in boxes 1-5 below)
a. For own waste only
b. For commercial purposes
Mode of Transportation
☐ 1. Air
☐ 2. Rail
☐ 3. Highway
☐ 4. Water
☐ 5. Other - specify

1. Off-Specification Used Oil Fuel
a. Generator Marketing to Burner
b. Other Marketer
c. Burner - indicate device(s) -
Type of Combustion Device
☐ 1. Utility Boiler
☐ 2. Industrial Boiler
☐ 3. Industrial Furnace
2. Specification Used Oil Fuel Marketer
(or On-site Burner) Who First Claims
the Oil Meets the Specification

IX. Description of Regulated Wastes (Use additional sheets if necessary)

A. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.20 - 261.24)

1. Ignitable (D001) ☒ 2. Corrosive (D002) ☐ 3. Reactive (D003) ☐ 4. Toxicity (D000) ☒

(List specific EPA hazardous waste number(s) for the Toxicity Characteristic contaminant(s))

D 0 0 6

B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33. See instructions if you need to list more than 12 waste codes.)

1	2	3	4	5	6
U 2 2 8	U 1 5 4	U 0 0 2	U 2 2 0	U 0 8 1	U 1 6 5
7 TCE	8	9 acetone	10	11	12

C. Other Wastes. (State or other wastes requiring an I.D. number. See instructions.)

1	2	3	4	5	6

X. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment.

Signature

Name and Official Title (type or print)

Date Signed

XI. Comments

C00983789504

NOTIFICATION REVISIONS FORM

12/91

LOCATION ADDRESS LABEL

MAILING ADDRESS LABEL

EPA Identification numbers are site specific. If the site location on the above label has changed, it is required that you notify for the new site. Contact Jeannette M. Polniak at the Colorado Department of Health, Hazardous Materials and Waste Management Division at 331-4840 for forms.

Enter any changes, as they apply to your site in the spaces provided.

NAME OF FACILITY: US EPA Cleanup
(if different than above)

MAILING ADDRESS: 1776 S. Jackson St.
Denver, CO 80210

CONTACT: John Duwaldt/Randy Perlis PHONE NUMBER: 757-4984

CHANGE IN STATUS: ☐ Large Quantity Generator
☐ Small Quantity Generator
☐ Conditionally Exempt Generator

EPA I.D. # INACTIVE: (no longer generate hazardous waste at location on label).

☐ Never generated
☐ Out of business
☐ Excluded or delisted waste
☐ Non-hazardous waste
☒ One-time disposal only
☐ Other _____

OTHER CHANGES TO EPA NOTIFICATION FORM 8700-12

I understand by submitting this form to the Colorado Department of Health, it will change the information that was on "EPA Notification of Hazardous Waste Activity form 8700-12".

Randy Perlis
Signature

3/31/93
Date

7/13/93 - Noted in RCRIS